1	AN ACT relating to family caregivers.
2	Be it enacted by the General Assembly of the Commonwealth of Kentucky:
3	→ SECTION 1. A NEW SECTION OF KRS CHAPTER 216B IS CREATED TO
4	READ AS FOLLOWS:
5	As used in Sections 1 to 6 of this Act:
6	(1) "After-care" means assistance with self-care tasks to be provided by a lay
7	caregiver to a patient in the patient's residence after the patient's discharge from
8	a hospital and may include but is not limited to:
9	(a) Assisting with basic or instrumental activities of daily living; and
10	(b) Carrying out self-care tasks such as managing wound care, assisting in the
11	administration of medications, and utilizing home medical supplies;
12	(2) "Discharge" means a patient's exit or release from a hospital to the patient's
13	residence following an inpatient stay;
14	(3) "Hospital" means a health facility as defined in KRS 216B.015 that provides
15	inpatient care;
16	(4) (a) "Lay caregiver" means a nonmedical individual, eighteen (18) years of ago
17	or older, who takes care of a patient and is designed as a lay caregiver by
18	that patient to provide after-care assistance to the patient living in his or her
19	residence; and
20	(b) A lay caregiver includes but is not limited to a relative, partner, friend, or
21	neighbor who has a significant relationship with the patient; and
22	(5) "Residence" means a dwelling that the patient considers to be his or her home. A
23	"residence" does not include any health facility licensed or certified by the
24	Commonwealth.
25	→SECTION 2. A NEW SECTION OF KRS CHAPTER 216B IS CREATED TO
26	READ AS FOLLOWS:
27	(1) A hospital shall provide each patient or, if applicable, the patient's legal guardian

1		with at least one (1) opportunity to designate one (1) lay caregiver following the
2		patient's admission into a hospital and prior to the patient's discharge.
3	<u>(2)</u>	If the patient is unconscious or otherwise incapacitated upon admission into a
4		hospital, the hospital shall provide the patient or the patient's legal guardian with
5		an opportunity to designate a lay caregiver when the patient recovers his or her
6		consciousness or capacity, so long as the designation or lack of a designation
7		does not interfere with, delay, or otherwise affect the medical care provided to the
8		patient.
9	<u>(3)</u>	If the patient or the patient's legal guardian declines to designate a lay caregiver,
10		the hospital shall document this election in the patient's medical record and the
11		hospital shall be deemed to comply with Sections 1 to 6 of this Act.
12	<u>(4)</u>	If the patient or the patient's legal guardian designates an individual as a lay
13		caregiver under this section, the hospital shall request the written consent of the
14		patient or the patient's legal guardian to release medical information to the
15		patient's designated lay caregiver following the hospital's established procedures
16		for releasing personal health information and in compliance with all federal and
17		state laws.
18	<u>(5)</u>	If the patient or the patient's legal guardian declines to consent to release
19		medical information to the patient's designated lay caregiver, the hospital shall
20		not be required to provide notice to the caregiver under Section 3 of this Act or
21		provide information contained in the patient's discharge plan under Section 4 of
22		this Act.
23	<u>(6)</u>	The hospital shall record the patient's designation of lay caregiver, the
24		relationship of the designated caregiver to the patient, and the name, telephone
25		number, and address of the patient's designated lay caregiver in the patient's
26		medical record.
27	<i>(7)</i>	A patient may elect to change his or her designated lay caregiver at any time, and

1	the hospital shall record this change in the patient's medical record as soon as
2	practicable.
3	(8) A designation of a lay caregiver by a patient or a patient's legal guardian under
4	this section shall not obligate any individual to perform any after-care tasks for
5	any patient.
6	(9) This section shall not be construed to require a patient or a patient's legal
7	guardian to designate any individual as a lay caregiver.
8	→ SECTION 3. A NEW SECTION OF KRS CHAPTER 216B IS CREATED TO
9	READ AS FOLLOWS:
10	If a patient or a patient's legal guardian has designated a lay caregiver, the hospital
11	shall notify the patient's designated lay caregiver of the patient's discharge as soon as
12	practicable. If the hospital is unable to contact the designated lay caregiver, the lack of
13	contact shall not interfere with, delay, or otherwise affect the medical care provided to
14	the patient, or an appropriate discharge of the patient.
15	→ SECTION 4. A NEW SECTION OF KRS CHAPTER 216B IS CREATED TO
16	READ AS FOLLOWS:
17	(1) As soon as practicable a hospital shall consult with a designated lay caregiver
18	regarding the patient's after-care needs. If the hospital is unable to contact the
19	designated lay caregiver, the lack of contact shall not interfere with, delay, or
20	otherwise affect an appropriate discharge of the patient.
21	(2) A discharge plan shall include:
22	(a) The name and contact information of the designated lay caregiver;
23	(b) A description of after-care tasks the patient may perform at the patient's
24	residence; and
25	(c) Contact information for health care, community, and long-term care
26	resources and supports that may be available and appropriate to assist in
27	implementing the patient's discharge plan.

1	(3) The purpose of the hospital's consultation with a patient's lay caregiver as
2	described in this section is to assist the lay caregiver in preparing for the patient's
3	after-care needs, which may include demonstrations of after-care tasks and an
4	opportunity to ask questions. The date and time of the consultation shall be
5	documented in the patient's medical record.
6	(4) The Cabinet for Health and Family Services may promulgate administrative
7	regulations it deems necessary to implement Sections 1 to 6 of this Act.
8	→ SECTION 5. A NEW SECTION OF KRS CHAPTER 216B IS CREATED TO
9	READ AS FOLLOWS:
10	Nothing in Sections 1 to 6 of this Act shall be construed to interfere with the rights of
11	an agent operating under a valid health care directive pursuant to KRS Chapter 311.
12	→ SECTION 6. A NEW SECTION OF KRS CHAPTER 216B IS CREATED TO
13	READ AS FOLLOWS:
14	Nothing in Sections 1 to 6 of this Act shall be construed to create a private right of
15	action or be construed as establishing a standard of care, with respect to a claim that a
16	hospital has failed to comply with Sections 1 to 6 of this Act either in whole or in part.